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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2020

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning 01-01-2020 , and ending 12-31-2020

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
INTERNATIONAL JUSTICE MISSION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 58147

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 200378147

D Employer identification number

54-1722887

E Telephone number

(703) 465-5495

G Gross receipts \$ 88,175,869

F Name and address of principal officer:
GARY HAUGEN
PO BOX 58147
WASHINGTON, DC 200378147

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ IJM.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1994

M State of legal domicile: VA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
THE MISSION OF IJM IS TO PROTECT PEOPLE IN POVERTY FROM VIOLENCE AND INJUSTICE.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3 10

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9

5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 350

6 Total number of volunteers (estimate if necessary) 6 395

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0

7b Net unrelated business taxable income from Form 990-T, line 39 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year Current Year

73,983,260 87,542,861

157,301 206,979

183,059 129,378

-229,973 19,251

74,093,647 87,898,469

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

16b Total fundraising expenses (Part IX, column (D), line 25) ▶9,381,877

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Prior Year Current Year

1,160,986 2,886,438

0 0

43,215,300 47,117,491

0 0

28,060,174 29,330,312

72,436,460 79,334,241

1,657,187 8,564,228

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Beginning of Current Year End of Year

42,095,459 53,340,036

22,518,402 25,198,751

19,577,057 28,141,285

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer
2021-08-30
Date

STACY MCMAHAN CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date
2021-08-27

Check ☐ if self-employed

PTIN
P01234578

Firm's name ▶ RSM US LLP

Firm's EIN ▶ 42-0714325

Firm's address ▶ 1861 INTERNATIONAL DRIVE SUITE 400
MCLEAN, VA 22102

Phone no. (703) 336-6400

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2020)

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☒

1 Briefly describe the organization's mission:

THE MISSION OF INTERNATIONAL JUSTICE MISSION IS TO PROTECT PEOPLE IN POVERTY FROM VIOLENCE BY RESCUING VICTIMS, BRINGING THE CRIMINALS TO JUSTICE, RESTORING SURVIVORS TO SAFETY AND STRENGTH, AND HELPING LOCAL LAW ENFORCEMENT BUILD A SAFE FUTURE THAT LASTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 1

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code:) (Expenses \$ 42,723,318 including grants of \$ 2,886,438) (Revenue \$ 198,879)
See Additional Data	

4b	(Code:) (Expenses \$	13,112,048	including grants of \$) (Revenue \$	8,100)
	See Additional Data				

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e	Total program service expenses ▶	55,835,366
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		No
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		No
28b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		No
28c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
35b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<div style="border: 1px solid black; padding: 2px;"> 2a 350 </div>				
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		No
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b If "Yes," enter the name of the foreign country: IN, TH, KE, RP, BL, CB, GT, UG, GH, DR, ES, KS, RO, BM					
5a Was the organization filing any reportable information under the FATCA for the calendar year? <i>See instructions for filing requirements for Foreign Bank and Financial Accounts (FBAR).</i>			5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year	<div style="border: 1px solid black; padding: 2px;"> 7d </div>				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?					
9 Sponsoring organizations maintaining donor advised funds.					
a Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10 Section 501(c)(7) organizations. Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	<div style="border: 1px solid black; padding: 2px;"> 10a </div>				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<div style="border: 1px solid black; padding: 2px;"> 10b </div>				
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders	<div style="border: 1px solid black; padding: 2px;"> 11a </div>				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<div style="border: 1px solid black; padding: 2px;"> 11b </div>				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<div style="border: 1px solid black; padding: 2px;"> 12b </div>		12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<div style="border: 1px solid black; padding: 2px;"> 13b </div>				
c Enter the amount of reserves on hand	<div style="border: 1px solid black; padding: 2px;"> 13c </div>				
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>			14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.			15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 10		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b 9		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶
 FL, GA, HI, MN, MS, ND, NH, NC, OR, PA, SC, TN, VA, WV, WI, CA, MI, NM

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶ STACY MCMAHAN PO BOX 58147 WASHINGTON, DC 200378147 (703) 465-5495

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

[illegible]

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,719,737	0	647,139

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **74**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DELOITTE CONSULTING LLP 4022 SELLS DR HERMITAGE, TN 37076	CONSULTING SERVICES	786,659
QUALITY SYSTEM SOLUTIONS LLC 6054 S MACK AVE GILBERT, AZ 85298	INDEPENDENT CONSULTANT	248,188
PARAGONN WEB DEVELOPMENT LLC 22100 NEW HAMPSHIRE AVE BROOKEVILLE, MD 20833	WEB MAINTENANCE AND DEVELOPMENT	185,514
TRIPLE A INC 126 PIXEL IRVINE, CA 92618	INDEPENDENT CONSULTANT	176,577
RIOS PARTNERS LLC 2011 CRYSTAL DRIVE SUITE 400 ARLINGTON, VA 22202	CONSULTING SERVICES	141,451

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **6**

Form 990 (2020)		Page 9			
Part VIII		Statement of Revenue			
Check if Schedule O contains a response or note to any line in this Part VIII		<input type="checkbox"/>			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	32,642		
	b Membership dues	1b			
	c Fundraising events	1c	1,749,678		
	d Related organizations	1d			
	e Government grants (contributions)	1e	1,915,950		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	83,844,591		
	g Noncash contributions included in lines 1a - 1f:\$	1g	4,415,521		
	h Total. Add lines 1a-1f		87,542,861		
Program Service Revenue	2a CONFERENCE	Business Code			
		900099	198,879	198,879	
	b HONORARIUM	900099	8,100	8,100	
	c				
	d				
	e				
	f All other program service revenue.				
g Total. Add lines 2a-2f.		206,979			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		110,434		110,434
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	6a	(i) Real 112,493	(ii) Personal	
	b Less: rental expenses	6b	141,666		
	c Rental income or (loss)	6c	-29,173		
	d Net rental income or (loss)		-29,173		-29,173
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities 61,425	(ii) Other	
	b Less: cost or other basis and sales expenses	7b	42,481		
	c Gain or (loss)	7c	18,944		
	d Net gain or (loss)		18,944		18,944
	8a Gross income from fundraising events (not including \$ 1,749,678 of contributions reported on line 1c). See Part IV, line 18	8a	0		
	b Less: direct expenses	8b	93,253		
	c Net income or (loss) from fundraising events		-93,253		-93,253
	9a Gross income from gaming activities. See Part IV, line 19	9a			
	b Less: direct expenses	9b			
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances	10a			
	b Less: cost of goods sold	10b			
	c Net income or (loss) from sales of inventory				
Miscellaneous Revenue	Business Code				
11a OTHER INCOME	900099	141,677		141,677	
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		141,677			
12 Total revenue. See instructions		87,898,469	206,979	0	148,629

Form 990 (2020)

Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).				
Check if Schedule O contains a response or note to any line in this Part IX <input checked="" type="checkbox"/>				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	2,886,438	2,886,438		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,966,726	2,100,773	518,613	347,340
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	30,617,804	21,680,824	5,352,290	3,584,690
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,388,390	983,135	242,704	162,551
9 Other employee benefits	10,429,060	7,384,939	1,823,101	1,221,020
10 Payroll taxes	1,715,511	1,214,773	299,888	200,850
11 Fees for services (non-employees):				
a Management				
b Legal	392,332	225,948	103,608	62,776
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	11,659,123	6,884,298	3,264,310	1,510,515
12 Advertising and promotion	1,246,273	768,153	25,388	452,732
13 Office expenses	2,529,981	2,053,180	191,976	284,825
14 Information technology	4,544,838	2,763,023	1,360,589	421,226
15 Royalties				
16 Occupancy	4,848,746	3,841,693	821,003	186,050
17 Travel	1,447,582	1,290,113	86,447	71,022
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	900,219	554,859	18,339	327,021
20 Interest	780,457	128,641	121,705	530,111
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,014,514	906,993	88,171	19,350
23 Insurance	309,022	139,962	141,681	27,379
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DUES & SUBSCRIPTION	262,131	118,724	120,182	23,225
b INTERNSHIP EXPENSES	34,137	21,041	695	12,401
c GOOD SAMARITAN EXPENSES	14,391	14,391		
d				
e All other expenses	-653,434	-126,535	-463,692	-63,207
25 Total functional expenses. Add lines 1 through 24e	79,334,241	55,835,366	14,116,998	9,381,877
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	301,050	213,746	0	87,304

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,291,346	1	1,775,901
	2	Savings and temporary cash investments		33,382,458	2	40,677,128
	3	Pledges and grants receivable, net		672,089	3	168,995
	4	Accounts receivable, net		1,406,188	4	815,255
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,939,779	9	2,130,212
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	9,711,215		
	b	Less: accumulated depreciation	10b	5,772,587		
				2,918,799	10c	3,938,628
	11	Investments—publicly traded securities			11	
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
15	Other assets. See Part IV, line 11		484,800	15	3,833,917	
16	Total assets. Add lines 1 through 15 (must equal line 33)		42,095,459	16	53,340,036	
Liabilities	17	Accounts payable and accrued expenses		6,532,623	17	8,415,382
	18	Grants payable			18	
	19	Deferred revenue		11,473,585	19	8,990,069
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	4,024,900
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		4,512,194	25	3,768,400
	26	Total liabilities. Add lines 17 through 25		22,518,402	26	25,198,751
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		8,137,864	27	6,371,160
	28	Net assets with donor restrictions		11,439,193	28	21,770,125
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		19,577,057	32	28,141,285
33	Total liabilities and net assets/fund balances		42,095,459	33	53,340,036	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	87,898,469
2	Total expenses (must equal Part IX, column (A), line 25)	2	79,334,241
3	Revenue less expenses. Subtract line 2 from line 1	3	8,564,228
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19,577,057
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	28,141,285

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Yes	

Additional Data

Software ID:
Software Version:
EIN: 54-1722887
Name: INTERNATIONAL JUSTICE MISSION

Form 990 (2020)

Form 990, Part III, Line 4a:

FIELD OPERATIONSINTERNATIONAL JUSTICE MISSION'S FIELD OPERATIONS RESPOND TO A VAST AND DEVASTATING CATEGORY OF NEED: VIOLENCE AGAINST PEOPLE IN POVERTY. THE THREAT OF VIOLENCE IS PART OF EVERYDAY LIFE FOR PEOPLE WHO ARE POOR. ACCORDING TO THE GLOBAL SLAVERY INDEX, OVER 40 MILLION PEOPLE ARE ESTIMATED TO BE HELD AS MODERN-DAY SLAVES. THE INTERNATIONAL LABOR ORGANIZATION ESTIMATES THAT HUMAN TRAFFICKING FOR SEXUAL OR LABOR SLAVERY GENERATES PROFITS IN EXCESS OF MORE THAN \$150 BILLION ANNUALLY FOR TRAFFICKERS AND SLAVE OWNERS; AND ACCORDING TO GLOBAL ESTIMATES OF MODERN SLAVERY, 1 IN 4 VICTIMS OF MODERN SLAVERY IS A CHILD. IN MANY COUNTRIES, PERPETRATORS OF ABUSE AGAINST PEOPLE IN POVERTY EXPECT NO CONSEQUENCES FOR THEIR CRIMES, DESPITE LAWS AGAINST THE CRIME. THE RULE OF LAW SHOULD OFFER PROTECTION TO VULNERABLE PEOPLE, BUT, ACCORDING TO THE WORLD JUSTICE PROJECT, THERE ARE ESTIMATED 5 BILLION PEOPLE WHO LIVE IN A "JUSTICE GAP" WITHOUT THE PROTECTION AND BENEFITS OF THE LAW. IN THE FACE OF THIS ABUSE, IJM WORKS WITH PARTNERS TO STRENGTHEN JUSTICE SYSTEMS, RESCUE AND RESTORE VICTIMS, AND BRING CRIMINALS TO JUSTICE TO ENSURE THEY ARE HELD ACCOUNTABLE AND STOPPING THE CYCLE OF VIOLENCE AND DETERRING OTHERS FROM ABUSING VULNERABLE PEOPLE.IJM ATTORNEYS, INVESTIGATORS, SOCIAL WORKERS, COMMUNITY ACTIVISTS AND OTHER PROFESSIONALS WORK IN 24 COMMUNITIES THROUGHOUT AFRICA, LATIN AMERICA, EUROPE, SOUTH ASIA AND SOUTHEAST ASIA TO COLLABORATE WITH JUSTICE SYSTEM AND COMMUNITY LEADERS TO RESPOND EFFECTIVELY TO VIOLENCE.IJM'S TEAMS PROTECT PEOPLE IN POVERTY FROM VIOLENCE, INCLUDING CRIMES LIKE SLAVERY, VIOLENCE AGAINST WOMEN AND CHILDREN, AND POLICE ABUSE OF POWER. BY COLLABORATING WITH COMMUNITIES AND GOVERNMENTS, IJM SERVES INDIVIDUAL VICTIMS OF VIOLENCE AND PURSUES DRAMATIC IMPROVEMENTS IN THE JUSTICE SYSTEM TO PROTECT ALL PEOPLE VULNERABLE TO THE CRIME. FOR NEARLY 25 YEARS, IJM AND OUR PARTNERS HAVE WORKED ALONGSIDE LOCAL AUTHORITIES TO BUILD COMMUNITIES WHERE ALL PEOPLE CAN EXPECT TO BE SAFE AND PROTECTED. TOGETHER, WE HAVE LEARNED HOW TO DESIGN IMPROVEMENTS WITHIN JUSTICE SYSTEMS THAT MEASURABLY REDUCE VIOLENCE AND SERVE SURVIVORS WITH DIGNITY. IJM DOES THIS IN THE FOLLOWING WAYS:STRENGTHEN JUSTICE SYSTEMSIJM COLLABORATES WITH JUSTICE SYSTEM AND COMMUNITY LEADERS TO RESPOND EFFECTIVELY TO VIOLENCE. TOGETHER, WE DESIGN IMPROVEMENTS THAT SERVE SURVIVORS, DETER CRIMINALS AND DRAMATICALLY DECREASE VIOLENCE.RESCUE AND RESTORE VICTIMSIJM PARTNERS WITH LOCAL AUTHORITIES TO RESCUE INDIVIDUAL VICTIMS OF VIOLENCE AND RESTORE SURVIVORS TO SAFETY AND STABILITY.BRING CRIMINALS TO JUSTICEIJM WORKS ALONGSIDE JUSTICE SYSTEM OFFICIALS TO ENSURE THAT CRIMINALS ARE HELD ACCOUNTABLE, STOPPING THE CYCLE OF VIOLENCE AND DETERRING OTHERS FROM ABUSING VULNERABLE PEOPLE.SCALE DEMAND FOR PROTECTIONIJM CONVENED AND EQUIPPED CHAMPIONS TO ADVOCATE FOR PROTECTION AS AN ESSENTIAL AND TANGIBLE FUTURE FOR EVERYONE.IN 2020, IJM, OUR PARTNERS AND TRAINED GOVERNMENTS BROUGHT RELIEF TO 8,671 VICTIMS OF VIOLENCE AND OPPRESSION. EACH VICTORY REPRESENTS THE TENACIOUS WORK OF IJM'S TEAM OF ATTORNEYS, SOCIAL WORKERS, AND INVESTIGATORS - WORK THAT CONTINUES LONG-TERM AS SURVIVORS HEAL AND REBUILD THEIR LIVES WITH THE ASSISTANCE OF IJM AFTERCARE AND AS IJM ATTORNEYS PURSUE JUSTICE IN COURT, PROCESSES THAT CAN TAKE YEARS. IN 2020, A TOTAL OF 927 SUSPECTED PERPETRATORS WERE RESTRAINED AND 437 CRIMINALS IN LOCAL COURTS WERE CONVICTED. ADDITIONALLY, 526 SURVIVORS WERE RESTORED TO SAFETY AND STABILITY. FINALLY, IJM TRAINED 38,000+ PEOPLE TO RECOGNIZE AND RESPOND TO VIOLENCE, INCLUDING 19,000+ JUSTICE SYSTEM OFFICIALS (SUCH AS POLICE, PROSECUTORS, JUDGES AND SOCIAL WORKERS) AND 19,000+ CHURCH AND COMMUNITY MEMBERS.

Form 990, Part III, Line 4b:

BUILDING A MOVEMENT IJM SEEKS TO FUEL A GLOBAL JUSTICE MOVEMENT AND ADVANCE ITS MISSION BY DRAWING THE WORLD'S ATTENTION TO VIOLENCE AGAINST PEOPLE WHO ARE POOR, EXPANDING THE NUMBER OF PEOPLE AND INSTITUTIONS ENGAGED IN THE FIGHT FOR JUSTICE, INFLUENCING LEADERS IN ALL SECTORS TO BECOME CHAMPIONS FOR PROTECTING THE PEOPLE IN POVERTY AND EQUIPPING CHRISTIANS TO JOYFULLY SERVE IN THE WORK OF JUSTICE. IJM'S CHURCH MOBILIZATION EFFORTS ENGAGE CHURCH COMMUNITIES AROUND THE WORLD IN THE FIGHT FOR JUSTICE. IN 2020, 18,920 CHURCHES WERE ENGAGED IN IJM'S FREEDOM SUNDAY PROGRAM, WHICH EQUIPS CHURCHES TO ENGAGE THEIR CONGREGATIONS IN BRINGING AN END TO SLAVERY. IJM STUDENT MOBILIZATION SUPPORTS A GROWING "JUSTICE GENERATION" OF STUDENTS SERVING AS NEW LEADERS IN THE FIGHT FOR INTERNATIONAL HUMAN RIGHTS. WORKING WITH COLLEGE CAMPUS CHAPTERS AND HIGH SCHOOLS ACROSS THE U.S., IJM'S PROGRAMS EMPOWER STUDENTS TO LEVERAGE THEIR TALENTS AND ENERGY TO FIGHT SLAVERY AND OTHER FORMS OF EVERYDAY VIOLENCE. IJM'S ADVOCACY AND MOBILIZATION TEAM ENGAGES HUNDREDS OF GRASSROOTS VOLUNTEERS WHO ARE U.S.-BASED IN SUPPORTING A NUMBER OF INITIATIVES INCLUDING ADVOCATING FOR U.S. GOVERNMENT POLICIES THAT WILL COMBAT VIOLENCE AGAINST THE POOR. IJM HAS PROVIDED THOUSANDS OF INDIVIDUALS AND GROUPS WITH CONCRETE TOOLS FOR SHARING ABOUT EVERYDAY VIOLENCE AND MOBILIZING POLICYMAKERS TO HELP END IT. IJM HAS MORE THAN 1,200 STAFF, APPROXIMATELY 95% OF WHOM ARE NATIONALS OF THE COUNTRIES IN WHICH THEY SERVE. IN PLACES WHERE WE WORK, MEDIA AND LOCAL CHURCHES ARE TAKING HOLD OF THE VISION AND EMPOWERING COMMUNITIES TO SEEK JUSTICE IN NEW AND EXCITING WAYS. BY RAISING AWARENESS OF THE ISSUE OF VIOLENCE AGAINST THE POOR, IJM BRINGS ALLIES FROM ALL WALKS OF LIFE INTO THE STRUGGLE TO PROTECT THE POOR FROM VIOLENCE. IJM'S WORK HAS BEEN FEATURED BY OUTLETS SUCH AS FORBES MAGAZINE, THE WASHINGTON POST, THE TIMES OF INDIA, THE GUARDIAN, THE NEW YORK TIMES, THE NEW YORKER, FOREIGN AFFAIRS, "THE TODAY SHOW," "THE OPRAH WINFREY SHOW," "DATELINE NBC," MSNBC, CNN, BBC WORLD NEWS, NATIONAL PUBLIC RADIO, NATIONAL GEOGRAPHIC, ESPN, REUTERS, AMONG MANY OTHERS.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARC ALLEN BOARD CHAIR	1.00	X		X				0	0	0
RACHEL BRAND DIRECTOR	1.00	X						0	0	0
JAMES ABRAHAM DIRECTOR	1.00	X						0	0	0
ERIC ASCHE DIRECTOR	1.00	X						0	0	0
JAMES PETERS DIRECTOR	1.00	X						0	0	0
RAJ PARKER DIRECTOR	1.00	X						0	0	0
TERRY MOCHAR DIRECTOR	1.00	X						0	0	0
NANCY ORTBERG DIRECTOR	1.00	X						0	0	0
LINDA RANZ DIRECTOR	1.00	X						0	0	0
NICHOLAS SENSLEY DIRECTOR	1.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PATTY SISON-ARROYO DIRECTOR	1.00	X						0	0	0
MELANIE LANE DIRECTOR	1.00	X						0	0	0
NICOLE BIBBINS-SEDACA DIRECTOR	1.00	X						0	0	0
GARY HAUGEN CEO	40.00	X		X				297,692	0	47,211
SEAN LITTON GLOBAL PRESIDENT	40.00			X				247,825	0	19,693
STACY MCMAHAN CFO	40.00			X				211,697	0	31,834
ERIC HA GENERAL COUNSEL & CHIEF RISK OFF.	40.00			X				185,057	0	49,548
JEANNIE ROSE BARKSDALE DEP. GEN. COUNSEL, GOVER. & POLICY	40.00			X				110,615	0	43,755
BERNARDO SANDOVAL CIO	40.00				X			183,159	0	35,494
BLAIR BURNS CHIEF PARTNERSHIP OFFICER	40.00				X			183,596	0	31,512

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MELISSA RUSSELL REGIONAL PRESIDENT, NORTH AMERICA	40.00				X			217,438	0	43,382
PHILIP LANGFORD PRESIDENT, IJM USA	40.00				X			176,840	0	41,468
SAJU MATHEW REGIONAL PRESIDENT, SOUTH ASIA	40.00				X			172,495	0	40,453
REBECCA VARGHESE VP & CONTROLLER, ACCOUNTING	40.00				X			170,334	0	20,810
CHRISTA SHARPE REGIONAL PRESIDENT, ASIA PACIFIC	40.00				X			165,670	0	40,528
PABLO VILLEDA ORTIZ REGIONAL PRESIDENT, LATIN AMERICA	40.00				X			157,766	0	40,854
SHAWN KOHL COUNTRY DIRECTOR, ROMANIA	40.00					X		333,823	0	32,288
BIJU MATHEW REGIONAL VP, STRATEGY & OPERATIONS	40.00					X		291,513	0	32,798
ANDREY SAWCHENKO REG. VP, FORCED LABOR SLAVERY HUB	40.00					X		222,983	0	32,881
JAMES FOSTER SENIOR OFFICER, US GOV. POLICY & PARTNERSHIP	40.00					X		205,740	0	32,121

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PHILLIP S MIANO DIRECTOR, INVEST. & LAW ENF. DEV.	40.00					X		185,494	0	30,509

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	53,520,882	71,237,272	68,272,193	73,983,260	87,542,861	354,556,468
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3	53,520,882	71,237,272	68,272,193	73,983,260	87,542,861	354,556,468
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). .						14,034,369
6	Public support. Subtract line 5 from line 4.						340,522,099

Section B. Total Support								
Calendar year (or fiscal year beginning in) ►		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
7	Amounts from line 4. . .	53,520,882	71,237,272	68,272,193	73,983,260	87,542,861	354,556,468	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	262,713	132,041	244,797	277,525	222,927	1,140,003	
9	Net income from unrelated business activities, whether or not the business is regularly carried on . . .							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	294,622	196,584	338,288	14,940	141,677	986,111	
11	Total support. Add lines 7 through 10						356,682,582	
12	Gross receipts from related activities, etc. (see instructions)						12	1,250,537
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>							

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14 95.470 %
15	Public support percentage for 2019 Schedule A, Part II, line 14	15 95.910 %
16a	33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>	
b	33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3a		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4a		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
7		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9a		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9b		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10a		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
10b		

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described in 11a above?		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
1 <input type="checkbox"/> Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (<i>explain in Part VI</i>). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by Line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required-- explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020:		
a	From 2015.		
b	From 2016.		
c	From 2017.		
d	From 2018.		
e	From 2019.		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016.		
b	Excess from 2017.		
c	Excess from 2018.		
d	Excess from 2019.		
e	Excess from 2020.		

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	REIMBURSED EXPENSES - 2016 AMOUNT: \$ 122,698. OTHER INCOME - 2016 AMOUNT: \$ 62,439. 2017 A MOUNT: \$ 112,974. 2018 AMOUNT: \$ 272,253. 2020 AMOUNT: \$ 141,677. FUNDRAISING INCOME - 201 6 AMOUNT: \$ 109,485. 2017 AMOUNT: \$ 83,610. 2018 AMOUNT: \$ 66,035. 2019 AMOUNT: \$ 14,940.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
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Part I-A

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$
3	Volunteer hours for political campaign activities (see instructions)	

Part I-B

Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV.	

Part I-C

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000	\$1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?	Yes		6,514
d	Mailings to members, legislators, or the public?	Yes		1,067
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		5,356
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			12,937
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1:	IN 2020, IJM STAFF MOBILIZED VOLUNTEERS TO LOBBY IN SUPPORT OF CONGRESSIONAL APPROPRIATIONS AND LEGISLATION TO COMBAT TRAFFICKING IN PERSONS AND VIOLENCE AGAINST WOMEN AND CHILDREN. THESE VOLUNTEER ACTIVITIES INCLUDED MEETING WITH MEMBERS OF CONGRESS AND STAFF IN THEIR DISTRICT AND VIA VIDEO CONFERENCE, AND CONTACTING LEGISLATORS VIA EMAIL, SOCIAL MEDIA, AND PHONE. VOLUNTEERS ARE TRAINED BY IJM STAFF THROUGH IN-PERSON TRAININGS, PHONE, INTERNET, EMAIL AND SOCIAL MEDIA. IJM STAFF WERE ALSO INVOLVED IN DIRECT LOBBYING IN SUPPORT OF CONGRESSIONAL APPROPRIATIONS AND LEGISLATION.

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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047
2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

(a)

Donor advised funds

(b)

Funds and other accounts

Part II

Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

2a

2b

2c

2d

Held at the End of the Year

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

1b

If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i)

Revenue included on Form 990, Part VIII, line 1 ► \$

(ii)

Assets included in Form 990, Part X ► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a

Revenue included on Form 990, Part VIII, line 1 ► \$

b

Assets included in Form 990, Part X ► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D

Schedule D (Form 990) 2020

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐

Yes

☐

No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐

Yes

☐

No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐

Yes

☐

No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings			
c	Leasehold improvements	2,413,422	1,684,448	728,974
d	Equipment	4,061,859	2,787,884	1,273,975
e	Other	3,235,934	1,300,255	1,935,679
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶			3,938,628

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ▶		

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)SECURITY DEPOSITS	751,026
(2)EMPLOYEE AND OVERSEAS ADVANCES	32,891
(3)ASSETS HELD FOR SALE	3,050,000
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	3,833,917

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	3,768,400
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	3,768,400

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	95,593,255
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	1,618,810
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	6,075,976
e	Add lines 2a through 2d	2e	7,694,786
3	Subtract line 2e from line 1	3	87,898,469
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	87,898,469

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	84,992,994
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,618,810
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	4,039,943
e	Add lines 2a through 2d	2e	5,658,753
3	Subtract line 2e from line 1	3	79,334,241
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	79,334,241

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 54-1722887
Name: INTERNATIONAL JUSTICE MISSION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	IJM IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE). IN ADDITION, IJM QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. IJM DID NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2020. IJM COMPLIES WITH THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES TOPIC, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE CONSOLIDATED FINANCIAL STATEMENTS. UNDER THIS POLICY, IJM MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. MANAGEMENT HAS EVALUATED IJM'S TAX POSITIONS AND HAS CONCLUDED THAT IJM HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH PROVISIONS OF THIS GUIDELINE. IJM WOULD BE LIABLE FOR INCOME TAXES IN THE U.S. FEDERAL JURISDICTION. GENERALLY, IJM IS NO LONGER SUBJECT TO U.S. FEDERAL TAX EXAMINATIONS BY TAX AUTHORITIES BEFORE 2017.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	SPECIAL EVENT EXPENSES ON PART VIII LINE 8B 93,253. RENTAL EXPENSES ON PART VIII LINE 6B 1 41,666. IJM UK REVENUE INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 3,516,025. IJM CANADA REVENUE INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 6,063,084. ELIMINATIONS INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS -3,738,052.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	SPECIAL EVENT EXPENSES ON PART VIII LINE 8B 93,253. RENTAL EXPENSES ON PART VIII LINE 6B 1 41,666. IJM UK EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 2,937,012. IJM CANADA EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 4,606,064. ELIMINATIONS INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS -3,738,052.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	22	744			54,862,518
b Total from continuation sheets to Part I	0	0			11,622,399
c Totals (add lines 3a and 3b)	22	744			66,484,917

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶	15
3	Enter total number of other organizations or entities	▶	5

Part III	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
-----------------	---

Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* ☒ Yes ☐ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2:	FOR CASH GRANTS THAT ARE GIVEN BY THE ORGANIZATION, IJM REQUIRES, AT A MINIMUM, QUARTERLY BUDGET TO ACTUAL REPORTS FOR THE PROJECT THAT HAS BEEN FUNDED BY THE GRANT. FOR SOME PROJECT GRANTS, THE REPORTING REQUIREMENT IS MONTHLY. FURTHER, IJM REQUIRES A COPY OF THE AUDITED FINANCIAL STATEMENTS OF THE GRANTEE ORGANIZATION, WHEN AVAILABLE. IJM ALSO RESERVES THE RIGHT TO EXAMINE PERTINENT BOOKS, DOCUMENTS AND RECORDS RELATED TO THE FUNDS PROVIDED.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3:	THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

990 Schedule F, Supplemental Information

Return Reference	Explanation
FORM 990, SCHEDULE F, SUPPLEMENTAL INFORMATION:	<p>INTERNATIONAL JUSTICE MISSION EXISTS TO PROTECT PEOPLE FROM VIOLENT FORCES OF INJUSTICE AND TO ENSURE THAT PUBLIC JUSTICE SYSTEMS EFFECTIVELY AND SUSTAINABLY PROTECT PEOPLE IN POVERTY. IN PURSUIT OF THIS MISSION, IJM CONDUCTS CASEWORK ON BEHALF OF IMPOVERISHED VICTIMS OF VIOLENT ABUSE IN AFRICA, LATIN AMERICA, SOUTH ASIA, SOUTHEAST ASIA AND EUROPE. THIS CASEWORK BOTH ENSURES RELIEF FOR INDIVIDUAL VICTIMS OF ABUSE AND INFORMS IJM'S STRATEGIES FOR PURSUING TRANSFORMATIONAL CHANGE OF PUBLIC JUSTICE SYSTEMS. EACH IJM FIELD OFFICE ADDRESSES SPECIFIC FORMS OF OPPRESSION THAT IMPACT THE POOR IN THE GEOGRAPHIC REGION. IJM'S INVESTIGATIVE AND LEGAL TEAMS PARTNER WITH LOCAL AUTHORITIES TO ENSURE PERPETRATORS ARE ARRESTED, CHARGED AND CONVICTED FOR THESE VIOLENT ACTS; IJM SOCIAL WORKERS PROVIDE LONG-TERM SUPPORT TO VICTIMS OF THE CRIME. IJM USES ITS UNIQUE KNOWLEDGE OF SYSTEMIC GAPS, WEAKNESSES AND DEFICIENCIES GAINED THROUGH INDIVIDUAL CASEWORK TO PURSUE JUSTICE SYSTEM TRANSFORMATION THAT ENSURES PEOPLE IN POVERTY ARE EFFECTIVELY AND SUSTAINABLY SERVED BY THE PUBLIC JUSTICE SYSTEMS UPON WHICH THEY MUST RELY FOR PROTECTION. EXPENSE ALLOCATION: WHEN POSSIBLE, IJM RECORDS EXPENSES DIRECTLY TO THE FIELD OFFICES TO WHICH THEY RELATE; FOR PROGRAM EXPENSES NOT DIRECTLY ALLOCATED TO A SPECIFIC REGION, IJM ALLOCATES EXPENSES BASED ON THE PERCENTAGE OF OFFICES LOCATED IN THAT REGION OVER THE TOTAL NUMBER OF OFFICES. IJM ALLOCATES FUNDRAISING EXPENSES TO EACH REGION BASED ON THE BUDGET FOR THAT REGION AS A PERCENTAGE OF THE TOTAL IJM BUDGET.</p>

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART IV, LINE 6:	WHILE THE ORGANIZATION DOES NOT CONDUCT ANY OF ITS PROGRAMS WITHIN THE BOYCOTTING COUNTRIES THAT REQUIRE THE FILING OF FORM 5713, SOME MEMBERS OF THE ORGANIZATION HAVE FLOWN AIRLINES RELATED TO AT LEAST ONE OF THESE COUNTRIES TO CARRY OUT THEIR DUTIES. DUE TO THE BROAD NATURE OF THE INSTRUCTIONS AND DEFINITIONS RELATED TO THE FORM, THE ORGANIZATION HAS DETERMINED THAT IT IS REQUIRED TO FILE THE FORM IN ORDER TO REPORT THE PROCUREMENT OF AIRFARE FROM COMPANIES LOCATED IN THESE COUNTRIES.

Additional Data

Software ID:

Software Version:

EIN: 54-1722887

Name: INTERNATIONAL JUSTICE MISSION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	3	83	PROGRAM SERVICES	SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, RESEARCH, EDUCATION	8,706,497
EAST ASIA AND THE PACIFIC	8	180	PROGRAM SERVICES	LEGAL STATUS DOCUMENTATION; SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, RESEARCH, EDUCATION	15,909,443

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	1	9	PROGRAM SERVICES	SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION	3,476,068
SOUTH AMERICA	1	15	PROGRAM SERVICES	SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION	1,531,402

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	5	307	PROGRAM SERVICES	SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION	13,717,352
SUB-SAHARAN AFRICA	4	150	PROGRAM SERVICES	LAND RIGHTS/POLICE BRUTALITY/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, RESEARCH, EDUCATION	10,605,732

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	GRANT MAKING		915,260
SOUTH AMERICA	0	0	GRANT MAKING		764

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANT MAKING		3,292
EAST ASIA AND THE PACIFIC	0	0	GRANT MAKING		400,930

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANT MAKING		1,187,607
SUB-SAHARAN AFRICA	0	0	GRANT MAKING		378,585

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		3,069,822
CENTRAL AMERICA AND THE CARIBBEAN	0	0	FUNDRAISING		1,607,120

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	FUNDRAISING		565,160
SOUTH AMERICA	0	0	FUNDRAISING		248,873

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	FUNDRAISING		2,376,805
SUB-SAHARAN AFRICA	0	0	FUNDRAISING		1,784,205

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	SUBAWARD TO PILOT A SMALL COMMUNITY INTERVENTION PROJECT TO SUPPORT WOMEN AND CHILDREN WHO ARE VICTIMS OF VIOLENCE IN THE DEPARTMENT OF SANTA ANA, EL SALVADOR	9,595	WIRE TRANSFER			
		CENTRAL AMERICA AND THE CARIBBEAN	SUBAWARD TO ESTABLISH RULE OF LAW/REDUCE GANG VIOLENCE IN EL SALVADOR			31,597	AUDIO/VIDEO EQUIPMENT, COMPUTERS, SOFTWARE AND OTHER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT	COST

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	STRENGTHEN LEGAL ASSISTANCE TO VICTIMS OF INJUSTICE			7,333	AUDIO/VIDEO EQUIPMENT, COMPUTERS, SOFTWARE AND OTHER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT	COST
		CENTRAL AMERICA AND THE CARIBBEAN	PROVIDE HARDWARE/SOFTWARE FOR VICTIMS INSTITUTE FOR LEGAL ASSISTANCE TO VICTIMS OF INJUSTICE			5,435	AUDIO/VIDEO EQUIPMENT, COMPUTERS, SOFTWARE AND OTHER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT	COST

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EQUIP THE SALVADORAN NATIONAL CIVIL POLICE TO EFFECTIVELY USE WIRE INTERCEPT TECHNOLOGY TO INVESTIGATE COMPLEX CRIMINAL CASES			153,635	AUDIO/VIDEO EQUIPMENT, COMPUTERS, SOFTWARE AND OTHER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT	COST
		CENTRAL AMERICA AND THE CARIBBEAN	EQUIP THE SALVADORAN NATIONAL CIVIL POLICE TO EFFECTIVELY USE WIRE INTERCEPT TECHNOLOGY TO INVESTIGATE COMPLEX CRIMINAL CASES			102,483	CONTRACTED SERVICES: DEVELOP WORKPLAN/PROJECT MANAGEMENT FOR SIO WORKSPACE	COST

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EQUIP THE SALVADORAN NATIONAL CIVIL POLICE TO EFFECTIVELY USE WIRE INTERCEPT TECHNOLOGY TO INVESTIGATE COMPLEX CRIMINAL CASES			108,396	PROVIDE RENTAL FACILITIES, INCLUDING UTILITIES AND FURNISHINGS, TO ESTABLISH SAFEHOUSES FOR VICTIMS OF VIOLENCE	COST
		CENTRAL AMERICA AND THE CARIBBEAN	EQUIP THE SALVADORAN NATIONAL CIVIL POLICE TO EFFECTIVELY USE WIRE INTERCEPT TECHNOLOGY TO INVESTIGATE COMPLEX CRIMINAL CASES			698,031	VEHICLES/MOTORCYCLES/REGISTRATION & LICENSING TO EQUIP NATIONAL LAW ENFORCEMENT	COST

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	SUBAWARD TO PILOT A SMALL COMMUNITY INTERVENTION PROJECT TO SUPPORT WOMEN AND CHILDREN WHO ARE VICTIMS OF VIOLENCE	47,669	WIRE TRANSFER			
		EAST ASIA AND THE PACIFIC	COVID-19 RESPONSE ASSISTANCE			56,991	COVID-19 SUPPLIES AND SUPPORT	COST

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	SUBAWARDEE ON JTIP GRANT, "IMPROVING THE PHILIPPINES GOV'T RESPONSE TO ONLINE SEXUAL EXPLOITATION OF CHILDREN/CHILD LABOR TRAFFICKING"	16,506	CHECK			
		EAST ASIA AND THE PACIFIC	SUBAWARDEE ON JTIP GRANT, "IMPROVING THE PHILIPPINES GOV'T RESPONSE TO ONLINE SEXUAL EXPLOITATION OF CHILDREN/CHILD LABOR TRAFFICKING"	168,325	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	PROVIDE ECONOMIC DEVELOPMENT FOR VICTIMS RESCUED FROM BONDED LABOR SYSTEM	6,728	CHECK			
		SOUTH ASIA	IDENTIFY AND RESCUE VICTIMS OF BONDED LABOR/PROVIDE TRAINING TO LAW ENFORCEMENT/JUDICIARY SYSTEM	89,492	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	SUBAWARD UNDER GLOBAL FUND TO END MODERN DAY SLAVERY (GFEMS) - STRENGTHEN SYSTEMS TO PROTECT VICTIMS OF COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN (CSEC) IN INDIA	170,162	WIRE TRANSFER			
		SOUTH ASIA	ESTABLISH CRISIS INTERVENTION CENTER/PROTECTIVE HOMES FOR VICTIMS OF INJUSTICE	19,722	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	SUPPORT COLLABORATION WITH SOUTH ASIA INITIATIVE TO END VIOLENCE AGAINST CHILDREN	6,795	WIRE TRANSFER			
		SOUTH ASIA	SECURE SAFE MIGRATION & GRASSROOTS PREVENTION OF BONDED LABOR	5,437	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	IDENTIFY AND RESCUE VICTIMS OF BONDED LABOR/PROVIDE TRAINING TO LAW ENFORCEMENT/JUDICIARY SYSTEM	106,716	WIRE TRANSFER			
		SUB-SAHARAN AFRICA	STRENGTHENING THE CRIMINAL JUSTICE SYSTEM'S RESPONSE TO HUMAN TRAFFICKING IN GHANA	55,095	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PURCHASE BEDS/PPE/OTHER SUPPORT FOR UGANDA POLICE FORCE COVID-19 RESPONSE			8,002	COVID-19 SUPPLIES AND SUPPORT	COST
		SUB-SAHARAN AFRICA	SUBAWARDEE ON INL GRANT, "STRENGTHENING THE CRIMINAL JUSTICE SYSTEM'S RESPONSE TO HUMAN TRAFFICKING IN GHANA"	111,643	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GRANT TO OTHER NON-PROFIT ORGANIZATION TO PROVIDE ENGINEERING/DESIGN COSTS FOR SHELTERS FOR VICTIMS OF GENDER BASED VIOLENCE (GBV) IN UGANDA	6,343	CHECK			
		SUB-SAHARAN AFRICA	DONATION TO SUPPORT LAW ENFORCEMENT/JUDICIARY PARTNER ORGANIZATIONS	5,460	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PURCHASE CONTAINERS/RECORDING EQUIPMENT FOR VICTIMS & PERPETRATORS INTERVIEWS			76,015	PURCHASE CONTAINERS/RECORDING EQUIPMENT FOR INVESTIGATIONS/INTERVIEWS	COST
		SUB-SAHARAN AFRICA	WORK WITH AGENCIES TO REFURBISH OR BUILD NEW SHELTERS FOR VICTIMS OF GENDER BASED VIOLENCE (GBV)			18,471	PURCHASE ESSENTIAL ITEMS/CONSTRUCTION MATERIALS/ELECTRICAL SERVICES FOR GENDER BASED VIOLENCE (GBV) SHELTERS	COST

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	CENTRAL AMERICA AND THE CARIBBEAN	24			14,269	PARTICIPATION IN AFTERCARE PROGRAMS	COST
CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	CENTRAL AMERICA AND THE CARIBBEAN	1	1,500	CASH PAYMENT TO RECIPIENT			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	EAST ASIA AND THE PACIFIC	3	6,491	CASH PAYMENT TO RECIPIENT			
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	EAST ASIA AND THE PACIFIC	432			62,586	PARTICIPATION IN AFTERCARE PROGRAMS	COST

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	SOUTH ASIA	2	1,400	CASH PAYMENT TO RECIPIENT			
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	SOUTH ASIA	368			456,162	PARTICIPATION IN AFTERCARE PROGRAMS	COST

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	SUB-SAHARAN AFRICA	329			60,337	PARTICIPATION IN AFTERCARE PROGRAMS	COST
CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	SUB-SAHARAN AFRICA	4	5,000	CASH PAYMENT TO RECIPIENT			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	EUROPE (INCLUDING ICELAND & GREENLAND)	19			1,371	PARTICIPATION IN AFTERCARE PROGRAMS	COST

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		NATIONAL VIRTUAL BENEFIT (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue					
	1 Gross receipts	1,749,678			1,749,678
	2 Less: Contributions	1,749,678			1,749,678
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	93,253			93,253
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				93,253
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-93,253	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11	Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$		
c	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? <input type="checkbox"/> Yes <input type="checkbox"/> No		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2020
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization INTERNATIONAL JUSTICE MISSION		Employer identification number 54-1722887

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use		
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	INTERNATIONAL JUSTICE MISSION PROVIDES COMPANION TRAVEL FOR EXPATRIATES AS PART OF THE ORGANIZATION'S STAFF CARE PLAN. THERE ARE TWO SPECIFIC INSTANCES WHERE COMPANION TRAVEL IS ALLOWED. THESE ARE ANNUAL REQUIRED FURLOUGH TRAVEL AND REQUIRED ATTENDANCE AT AN ANNUAL EVENT HELD BY THE ORGANIZATION. ALL TRAVEL IS SUBJECT TO THE PROCUREMENT POLICY OF THE ORGANIZATION. ALL COMPANION TRAVEL IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE. THE ORGANIZATION HAS A TAX EQUALIZATION PROGRAM FOR ITS EXPATRIATE STAFF. THIS PROGRAM EQUALIZES THE TAX LIABILITY OF THE STAFF IN ORDER TO SIMULATE A TAX LIABILITY EQUAL TO WHAT THEY WOULD PAY IF THEY WERE EARNING THEIR INCOME AT OUR HEAD QUARTERS OFFICE IN WASHINGTON, DC. ANY TAXES PAID ON BEHALF OF AN EMPLOYEE PARTICIPATING IN THE TAX EQUALIZATION PROGRAM ARE TREATED AS TAXABLE INCOME TO THAT EMPLOYEE. IJM PROVIDES HOUSING ALLOWANCE BASED ON THE PLACE OF ASSIGNMENT FOR EXPATRIATE STAFF. THIS ALLOWANCE HELPS OFFSET THE COST OF LIVING IN THE HOST CITY WHERE EMPLOYEE HAS BEEN ASSIGNED. THIS ALLOWANCE IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE. IJM PAYS FOR THE REASONABLE AND NECESSARY COSTS OF HOME SECURITY SERVICES FOR EXPATRIATE EMPLOYEES IN HOST CITIES WHERE THERE ARE SIGNIFICANT SAFETY CONCERNS, AS DEEMED APPROPRIATE BY A DESIGNATED HOME SECURITY COMMITTEE. THESE SECURITY SERVICES MAY INCLUDE ONE OR MORE SECURITY GUARDS BASED AT THE EMPLOYEE'S HOME AND ARE TREATED AS TAXABLE INCOME TO THE EMPLOYEE.
PART I, LINE 4A	DURING THE YEAR THERE WAS A SEVERANCE PAYMENT MADE TO THE GLOBAL PRESIDENT OF \$59,753. ALL AMOUNTS ARE PROPERLY REPORTED ON FORM W-2 AND IN FORM 990, PART VII AND ON FORM 990, SCHEDULE J, PART II. ADDITIONAL SEVERANCE OF \$150,336 FOR THE GLOBAL PRESIDENT WAS ACCRUED AND RECORDED AS AN EXPENSE IN 2020. THE PAYMENT WAS MADE IN JANUARY 2021 AND WILL BE INCLUDED ON THE W-2 AND FORM 990 FOR 2021.

Additional Data

Software ID:

Software Version:

EIN: 54-1722887

Name: INTERNATIONAL JUSTICE MISSION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1SHAWN KOHL COUNTRY DIRECTOR, ROMANIA	(i)	124,271	0	209,552	7,456	24,832	366,111	0
	(ii)	0	0	0	0	0	0	0
1GARY HAUGEN CEO	(i)	296,660	0	1,032	17,100	30,111	344,903	0
	(ii)	0	0	0	0	0	0	0
2BIJU MATHEW REGIONAL VP, STRATEGY & OPERATIONS	(i)	132,763	0	158,750	7,966	24,832	324,311	0
	(ii)	0	0	0	0	0	0	0
3SEAN LITTON GLOBAL PRESIDENT	(i)	187,635	0	60,190	11,337	8,356	267,518	0
	(ii)	0	0	0	0	0	0	0
4MELISSA RUSSELL REGIONAL PRESIDENT, NORTH AMERICA	(i)	217,198	0	240	13,516	29,866	260,820	0
	(ii)	0	0	0	0	0	0	0
5ANDREY SAWCHENKO REG. VP, FORCED LABOR SLAVERY HUB	(i)	134,152	0	88,831	8,049	24,832	255,864	0
	(ii)	0	0	0	0	0	0	0
6STACY MCMAHAN CFO	(i)	182,689	0	29,008	11,209	20,625	243,531	0
	(ii)	0	0	0	0	0	0	0
7JAMES FOSTER SENIOR OFFICER, US GOV. POLICY & PAR	(i)	121,487	0	84,253	7,289	24,832	237,861	0
	(ii)	0	0	0	0	0	0	0
8ERIC HA GENERAL COUNSEL & CHIEF RISK OFF.	(i)	184,817	0	240	12,032	37,516	234,605	0
	(ii)	0	0	0	0	0	0	0
9BERNARDO SANDOVAL CIO	(i)	182,749	0	410	11,361	24,133	218,653	0
	(ii)	0	0	0	0	0	0	0
10PHILIP LANGFORD PRESIDENT, IJM USA	(i)	176,480	0	360	11,102	30,366	218,308	0
	(ii)	0	0	0	0	0	0	0
11PHILLIP S MIANO DIRECTOR, INVEST. & LAW ENF. DEV.	(i)	94,607	0	90,887	5,677	24,832	216,003	0
	(ii)	0	0	0	0	0	0	0
12BLAIR BURNS CHIEF PARTNERSHIP OFFICER	(i)	183,136	0	460	11,320	20,192	215,108	0
	(ii)	0	0	0	0	0	0	0
13SAJU MATHEW REGIONAL PRESIDENT, SOUTH ASIA	(i)	171,943	0	552	10,798	29,655	212,948	0
	(ii)	0	0	0	0	0	0	0
14CHRISTA SHARPE REGIONAL PRESIDENT, ASIA PACIFIC	(i)	165,310	0	360	10,417	30,111	206,198	0
	(ii)	0	0	0	0	0	0	0
15PABLO VILLEDA ORTIZ REGIONAL PRESIDENT, LATIN AMERICA	(i)	157,406	0	360	9,988	30,866	198,620	0
	(ii)	0	0	0	0	0	0	0
16REBECCA VARGHESE VP & CONTROLLER, ACCOUNTING	(i)	166,252	3,000	1,082	10,256	10,554	191,144	0
	(ii)	0	0	0	0	0	0	0
17JEANNIE ROSE BARKSDALE DEP. GEN. COUNSEL, GOVER. & POLICY	(i)	110,349	0	266	7,489	36,266	154,370	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	130	1,345,521	HISTORICAL PRICE DATA
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	1	3,050,000	SELLING PRICE
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	1	5,000	APPRAISED VALUE
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (CAMERA EQUIPMENT)	X	1	15,000	APPRAISED VALUE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

3

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II.

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b

If "Yes," describe in Part II.

33

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 51227J

Schedule M (Form 990) (2020)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B:	CONTRACTED WITH A THIRD PARTY THAT HANDLES NON-CASH DONATIONS AND A REAL-ESTATE COMPANY TO SELL A DONATED CONDO PROPERTY.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number

54-1722887

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FIRST, INFORMATION IS GATHERED BY THE ORGANIZATION AND ASSIMILATED BY THE KEY CPAS FROM THE ACCOUNTING TEAM. THEN, THE VP AND CONTROLLER AS WELL AS THE DIRECTOR OF ACCOUNTING REVIEW ALL THE INFORMATION WHICH IS THEN SUBMITTED TO THE TAX PREPARERS (AT RSM US LLP). THE CFO REVIEWS THE DRAFT OF THE FORM 990 THAT HAS BEEN PREPARED BY RSM US LLP AND SUGGEST CORRECTIONS/MODIFICATIONS AS MAY BE NEEDED. ONCE THE FINAL DRAFT OF THE FORM 990 IS PREPARED, THE CHAIR OF THE FINANCE AND AUDIT COMMITTEE OF THE BOARD REVIEWS A REDACTED VERSION OF THE DRAFT TO COMPLY WITH DONOR CONFIDENTIALITY; AFTER WHICH POINT, THE BOARD OF DIRECTORS IS NOTIFIED THAT THE FINAL REDACTED 990 IS AVAILABLE FOR THEIR REVIEW. FINALLY, RSM US LLP PREPARES AND REMITS THE FINAL 990 TO THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD CONFLICT OF INTEREST POLICY IS DETAILED AS AN APPENDIX TO THE IJM BOARD POLICY MANUAL. EACH OFFICER, DIRECTOR AND KEY EMPLOYEE AFFIRMS DURING ONBOARDING AND ANNUALLY THEREAFTER INTENT TO COMPLY WITH THE POLICY, AND AFFIRMATIVELY DISCLOSES ANY POTENTIAL CONFLICTS. STAFF ARE LIKEWISE REQUIRED TO AFFIRM INTENT TO APPLY WITH THE VERSION OF THE POLICY GOVERNING ALL EMPLOYEES, CONTAINED IN IJM'S POLICY LIBRARY. THE POLICIES FURTHER PROVIDE GUIDANCE ON HOW TO COMMUNICATE CONFLICTS THAT ARISE, AND A PROCESS FOR DISCLOSURE AND REVIEW OF RELATED PARTY TRANSACTIONS IS BUILT INTO IJM'S CONTRACTS PROCESS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>EXECUTIVE COMPENSATION: THE BOARD OF DIRECTORS (THE "BOARD") HAS THE RESPONSIBILITY FOR OVERSEEING IJM'S EXECUTIVE COMPENSATION PROGRAM. THE BOARD RECOGNIZES THAT IN ORDER FOR IJM TO ACHIEVE ITS AMBITIOUS STRATEGIC GOALS, IJM MUST BE ABLE TO ATTRACT, RETAIN AND REWARD QUALIFIED EXECUTIVES WHO WILL BE ABLE TO OPERATE EFFECTIVELY IN A CHALLENGING, COMPLEX ENVIRONMENT. CHIEF EXECUTIVE OFFICER: THE BOARD INDEPENDENTLY DETERMINES THE SALARY AND BENEFITS FOR THE CHIEF EXECUTIVE OFFICER. THE CPO PROVIDES THE BOARD WITH COMPETITIVE MARKET SALARY DATA OBTAINED FROM EXTERNAL COMPENSATION SURVEYS. BASED ON THE INFORMATION PRESENTED, THE BOARD DISCUSSES THE CHIEF EXECUTIVE OFFICER'S PERFORMANCE, THE OVERALL PERFORMANCE OF IJM, AND THE COMPETITIVE MARKET. THE BOARD INDEPENDENTLY MAKES COMPENSATION DECISIONS IN AN EXECUTIVE SESSION, WITHOUT THE CHIEF EXECUTIVE OFFICER PRESENT. SENIOR EXECUTIVES (VICE PRESIDENT LEVEL AND ABOVE): THE BOARD HAS DELEGATED TO THE CHIEF EXECUTIVE OFFICER THE AUTHORITY TO DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND EMPLOYEES. THE CPO PROVIDES COMPETITIVE MARKET SALARY DATA OBTAINED FROM EXTERNAL COMPENSATION SURVEYS, AND MAKES RECOMMENDATIONS BASED ON INPUT OBTAINED FROM EACH SENIOR EXECUTIVE'S DIRECT MANAGER.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. AD DITIONALLY, THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVA ILABLE TO THE PUBLIC UPON REQUEST, FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTI ON 6104(D).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 6,884,298. MANAGEMENT AND GENERAL EXPENSES 3,264,310. FUNDRAISING EXPENSES 1,510,515. TOTAL EXPENSES 11,659,123.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEP ENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEA RS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 5 AND PART V, LINE 2A:	AS OF 12/31/2020, IJM EMPLOYED A TOTAL OF 929 EMPLOYEES. OF THESE, 219 WERE EMPLOYED AT HQ IN WASHINGTON, DC; 15 WERE U.S. EXPATRIATES; 5 WERE THIRD COUNTRY NATIONALS; AND 690 WERE LOCAL NATIONAL STAFF IN OUR FIELD OFFICES. THIRD COUNTRY NATIONALS ARE CITIZENS OF NEITHER THE U.S. NOR THE COUNTRY IN WHICH THEY ARE WORKING, AND LOCAL NATIONAL STAFF MEMBERS LIVE IN, WORK IN AND ARE CITIZENS OF THE COUNTRY IN WHICH OUR OFFICE IS LOCATED. THESE TWO TYPES OF EMPLOYEES ARE NOT SUBJECT TO U.S. INCOME TAXES AND THEREFORE ARE NOT REPORTED ON IRS FORM W3. THE NUMBER IN PART I LINE 5 (350) RELATES TO THE NUMBER OF EMPLOYEES FOR WHOM IJM SUBMITTED W2 FORMS TO THE IRS AND THEREFORE INCLUDES U.S. STAFF WHO EARNED ANY INCOME FROM IJM THROUGHOUT THE YEAR, NOT JUST THE NUMBER OF STAFF AT YEAR END.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

See Additional Data Table

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)INTERNATIONAL JUSTICE MISSION UK PO BOX 12251 WITHAM CM8 9BX UK	PROTECT PEOPLE IN POVERTY	UK	501(C)(3)	LINE 7	INTERNATIONAL JUSTICE MISSION		No
(2)INTERNATIONAL JUSTICE MISSION CANADA 150 DUFFERIN AVE SUITE 604 LONDON, ONTARIO N6A 5N6 CA	PROTECT PEOPLE IN POVERTY	CA	501(C)(3)	LINE 7	INTERNATIONAL JUSTICE MISSION		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 54-1722887
Name: INTERNATIONAL JUSTICE MISSION

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
INTERNATIONAL JUSTICE MISSION KENYA RELIABLE TOWERS 7TH FL TOWERS A/B MOGOTIO ROAD WESTLANDS, NAIROBI KE	PROTECT PEOPLE IN POVERTY	KE	0	0	INTERNATIONAL JUSTICE MISSION
IJM KOREA FOUNDATION 38 6TH FL NOKSAPYEONG-DAERO 26-GI YONGSANGU, SEOUL KS	PROTECT PEOPLE IN POVERTY	KS	-5,841	-5,850	INTERNATIONAL JUSTICE MISSION
FUNDATIA INTERNATIONAL JUSTICE MISSION 15-19 HATMANUL ARBORE ST BUCHAREST 011601 RO	PROTECT PEOPLE IN POVERTY	RO	1,771,021	2,402,138	INTERNATIONAL JUSTICE MISSION
JAMBATAN CS SDN BHD UNIT NO17-2 LEVEL17 WISMA UOA II JALAN PINANG, KUALA LUMPUR 50450 MY	PROTECT PEOPLE IN POVERTY	MY	54,853	55,341	INTERNATIONAL JUSTICE MISSION
IJM FOUNDATION RASA TOWER 1 UNIT NO1603 16TH FL KHWANG CHATUCHAK KHET CHATUCHAK, BANGKOK 10900 TH	PROTECT PEOPLE IN POVERTY	TH	-40,964	77,939	INTERNATIONAL JUSTICE MISSION
INTERNATIONAL JUSTICE MISSION (LIMITED BY GUARANTEE) S 5914/4731 PO BOX 70445 KAMPALA UG	PROTECT PEOPLE IN POVERTY	UG	-254,711	880,933	INTERNATIONAL JUSTICE MISSION
INTERNATIONAL JUSTICE MISSION INDIA 66/2253 SARVPRIYA GURUDWARA ROAD NEW DEHLI, DEHLI 110005 IN	PROTECT PEOPLE IN POVERTY	IN	-2,320	2,897	INTERNATIONAL JUSTICE MISSION